

**Eastern Virginia Local Human Rights Committee
Meeting Minutes
January 23, 2014**

A meeting of the Eastern Virginia Local Human Rights Committee was held on Thursday, January 23, 2014, at St. Mary's Home for Disabled Children, 6171 Kempsville Circle, Norfolk, VA 23502.

Members Present:

Mr. Matthew Albright, Chair
Mr. David Paige, Secretary
Mr. John Dickinson, Member
Ms. Donna Collier, Member

Members Absent:

Ms. Denise Gordon, Vice Chair

Providers Present:

Jacqueline Parker-Mazyck, SC/QMRP, Holiday House of Portsmouth, Inc
Melanie Draughn, SW/HRC Liaison, Holiday House of Portsmouth, Inc
Amanda Caruso, Nurse Manager, Maryview Behavioral Medicine Center
Melanie Perez-Lopez, SW, St. Mary's Home for Disabled Children
Colleen Zalewski, Behavior Specialist, St. Mary's Home for Disabled Children
Rizal Cruz, AC Support Systems
Katie O'Keefe, Case Manager, Bair Foundation
Ronnie Brown, Owner, Community Options LLC
Yvonne Green, Coordinator, Virginia Home Based Counseling
Aman Massaquoi CEO, Angel House Inc
Mercedes Santos-Bell, Envision Family Services
Shemora Richardson, Jerious Counseling Services LLC
Cynthia Cummings, Jerious Counseling Services LLC
Dr. Damon Cary, Cary Associates – Youth Empowerment Services
Douglas Newsome-Individual Choices
Deborah Hamilton, AIM Family Services, LLC
Terrell Cuffee, Potentials In Life

Providers Absent:

Greg LeFever, Administrator, Better Life Services, Inc.
Psalms Assistive Support Services LLC-Latisha Holloway

Also Present Was:

Stewart Prost, Human Rights Advocate
Carmen Gerena, Secretary

I. **Call to Order**

Matthew Albright, called the regular session of the EVLHRC meeting to order at 9:37am, and Mrs. Carmen Gerena, Secretary for St. Mary's, recorded the minutes. Mr. Albright thanked everyone for coming. A quorum of members was present, and the meeting, having been duly convened, was ready to proceed.

II. **Approval of Meeting Agenda**

Meeting agenda was reviewed. There were no changes to be made. The Agenda was approved, motion made by Mr. John Dickinson and seconded by Ms. Donna Collier and was unanimously approved.

III. **Review of Minutes**

A motion to accept the minutes from our October 23, 2013 meeting as presented by Mr. Matthew Albright was motioned by Mr. John Dickinson and seconded by Ms. Donna Collier. Minutes were unanimously approved. Mr. Albright thanked Mrs. Terry Waldo for an excellent job on the minutes during Carmen's absence.

IV. **Public Comment**

There were no members of the public present.

V. **Old Business**

None.

VI. **New Business**

Mr. Albright noted that a list is being passed with all the affiliates' information, please take a look at it and make sure that your information is correct. Due to today's snow Mr. Albright brought up a suggestion to think about what we should do in case of inclement weather. He asked that everyone think about it and it will be brought up under old business in the April meeting.

VII. **Program Updates**

i. **The Bair Foundation**

Ms. Katie O'Keefe represented The Bair Foundation. We are currently licensed but there is nothing to report at this time.

ii. **Community Options**

Ronnie Brown, Program Director was present and reported. They have 5 individuals, no complaints and no abuse or allegations. A Human Rights representative will be coming to tour home.

iii. **Holiday House of Portsmouth, Inc**

Melanie Draughn presented, this quarter they have 28 individuals. There was 1 allegation which will be discussed in executive session.

iv. **Maryview Behavioral Medicine Center**

Amanda Caruso presented their report. 615 clients were served this quarter. There were 5 abuse allegations which will be discussed in executive session.

- v. **Psalms Assistive Support Services**
No representative available.
- vi. **AC Support System**
Rizal Cruz presented. There were no complaints or allegations.
- vii. **St. Mary's Home for Disabled Children / The Albero House**
Melanie Perez-Lopez presented. During this quarter we had 82 residents at St. Mary's. There were 4 allegations of neglect. Will meet in executive session. Ms. Perez-Lopez introduced Mr. Tom Laidlaw, Administrator at The Albero House and Mrs. Colleen Zalewski, Behavioral Specialist. Ms. Perez-Lopez request to make changes to the behavioral support manual. It was suggested to remove seclusion and delineate role of SCC vs LHRC. A chart has been submitted. Mr. Prost recommended sending the information to the committee for review and it will be revisited at the next meeting. Consensus to table item until next meeting with revised information being sent to committee, motion made by Mr. David Paige and seconded by Mr. John Dickinson. It was unanimously agreed upon.
- viii. **Better Life Services**
No representation.
- ix. **Virginia Home Based Counseling, P.C. and Virginia Support Services, P.C.**
Yvonne Green presented. No allegations of abuse or neglect. No complaints. Currently serving 106 in supported services and 29 in home based. We were audited on December 4th and 5th and had a licensing visit.
- x. **VA Home Based Counseling**
Yvonne Green presented. There have been no allegations of abuse or neglect. We are currently servicing 16 in home-based and 60 in supported services.
- xi. **Angel House**
Aman Massaquoi presented. We received our license in December. We have no clients yet and have nothing to report.
- xii. **Envision Family Services**
Mercedes Santos Bell, Executive Director presented. There is nothing to report. Have a new service to add. Will send copy to members and will discuss at next meeting.
- xiii. **Jerious Counseling Group**
Shenora Richardson presented. She introduced their new program director, Ms. Cynthia Cummings. We have 7 active cases. We have no allegations of abuse or neglect and no complaints. We received a visit from Mr. Prost this quarter and he found that everything was in compliance.
- xiv. **Cary Associates Youth Empowerment Services**
Dr. Damon Cary reported. We have 27 clients in intensive inhome program. We have no allegations of abuse or neglect to report. I would like to request a service

modification. Mr. Prost responded that he needs to get an additional service affiliation at our next meeting. Need to submit Human Rights policy for new service.

xv. **Individual Choices**

Dr. Douglas Newsome reported. We have no allegations of abuse or complaints. We have 1 restrictive plan that needs to be discussed in executive session.

xvi. **AIM Family Services**

Deborah Hamilton reported. We just got licensed in December do not have any clients as of yet. We are requesting additional affiliation for new location. An email was sent to the members with this request.

xvii. **Potentials In Life**

Terrell Cuffee reported. Not serving any clients yet. Nothing to report. Have not received license yet.

VIII. **Office of Human Rights**

Mr. Stewart Prost started his portion with a reminder of the reports that need to be submitted. Under the bylaws of this committee and the Cooperative agreement which you all signed you are required to provide a quarterly and an annual report. This quarter both the quarterly and annual reports are required, but usually you just send in the quarterly. I sent out 2 emails, 1 was that the State Human Rights Committee changed the way quarterly and annual reports are done. There was a memo sent out and new forms. One of the changes is that you check off which quarter you are in and the last page is very similar to the one you had before so that hasn't changed. What has changed is that instead of writing in the numbers and having to give written summaries of reports all you are going to have to do is run the CHRIS reports for abuse and CHRIS reports for complaints. In other words if you are licensed you should be set up in CHRIS and in order to be set up with CHRIS you need be set up in Delta. You may ask what is Delta and what is CHRIS. Delta is the secure porthole in which you get to the various applications of the departments. If you are a provider who services individuals with intellectual disabilities you were already in Delta in order to get paid because you have to submit your paperwork to what they call idles, which is kind of like the authorization for Medicaid for services. Also under that same porthole is CHRIS and CHRIS is the database where the department is keeping all issues related to abuse, all allegations to abuse and neglect and complaints and also serious injuries and deaths which are reported to licensing. So once you get licensed you need to be set up with CHRIS. What the report basically says is that if you have an allegation of abuse that was founded or a complaint that was a violation or any situation where you do a corrective action plan, not only do you do the report, but you print out the summary from CHRIS and you give it to the committee. This is new and I have already gotten some feedback. So let try it and see how it goes. Please use the new forms if you did not get the new forms, please let me know and I will make sure that you get them. The other thing about CHRIS is that a few weeks ago they deployed a revision to CHRIS that was to address some issues with CHRIS that a lot of the providers were having. When CHRIS was originally developed it was developed for state facilities and the Commonwealth of Virginia tries to be very homogenic in terms of what operating system everyone operates off of, what versions of internet explorer is used and what versions of

Windows etc. CHRIS was originally developed with Windows explorer 8 and come to find out that you can't even get internet explorer 8 and Microsoft does not support it any more. Therefore if you had internet explorer 9 or above, or google chrome or Firefox you had difficulties submitting reports, running report etc. Hopefully this is all fixed and should be able to get everything into CHRIS. Also there is an annual seclusion and restraint report due even if you didn't have any seclusion or restraint you still have to submit a report to the department, Marion Greenfield in Richmond. This does not go to me unless you want it to. This report was due on January 15th and it is now the 23rd so make sure you hand it in if you haven't.

Mr. Prost also mentioned that his office from time to time did training for new LHRC members. From this committee Donna has not attended and possibly Denise. The training will be at Eastern State Hospital at a date to be determined possibly late March early April so keep a watch out for that. It is a 3 hour training. A question was raised as to whether providers can attend; providers can come on a space available basis.

Mr. Stewart Prost then mentioned that now that they have been a little bit more fully staffed that they have been able to do more of than just the routine site visits. So as people get licensed don't be surprised if we give you a call and tell you that we'd like to take a look. The question was asked what is it that you look at and Mr. Prost answered that they have a monitoring tool that they use and that they are looking at things that relate to the human rights regulations. There are 2 kinds of visits that you can get; one is in response to a discharge from a training center. When someone is discharged from a training center one of the requirements is that they come to us with what they call a provider information request. They say do you think that this is a good match so that is one of the things that we look at when we do a site visit and we make sure that all is well at the same time. So if it is a program that I visited in the last 6 months, I can say, I know this program and I can contact the person and ask a few questions and fill out the form. One thing that I can tell you is that if you are thinking of accepting someone from a training facility you do have to have specific policies to address the use of protective restraints in your behavior plan policies. You may ask what are 'protective restraints' they are restraints for people with cognitive deficit or some who has a seizure disorder or are not steady on their feet or they have spasms and can fall out of bed so you have bed rails; they are not restraints for behavioral issues. Examples of the devices are: bed rails, Gerry chairs, seat belts on wheelchairs, gait belts, helmets, any of these are considered 'protective restraints'. Therefore, you need to have a policy that addresses the use of these restraints and that policy needs to have the elements of 1) a doctor's order, and that doctor is time limited of up to a year, 2) you have addressed it in a service plan, how and when this devices is going to be used, 3) staff training, so you have to have these things in your policies. This is the kind of thing that we may look at when we look at people's individual service plans. So if you're a residential program and you are looking at taking anyone from the training centers you need to have these policies in place. And these policies have to be reviewed by the LHRC because it is part of your behavior management policy. If these policies are not in place we will not recommend placement. Another kind of visit that we do is that we pick a list of providers that are recently licensed or ones that we haven't seen for a very long time for whatever reason and we will just come and take a visit. A lot of times what we are looking at is the physical plant and postings of rights and program rules if appropriate. We look at things like if it is a residential program, is there enough storage

space or is it clean, some of the basics. Paper work, policy wise, we look at the Human Rights policies that you have on hand, not the ones that you have given us, but the ones you are operating under. There are also going to be interviews with staff and with individuals receiving services. It's a compliance review mostly. So you may see one of us from time to time.

Mr. Albright asked if there were any questions for the Human Rights advocate.

Open Session

There was nothing further to add.

IX. Closed Session for Human Rights Complaints, Abuse, Discrimination, Formal/Informal Complaints:

At 10:40am Mr. David Paige moved the EVLHRC go into executive session pursuant to the Virginia Code Section 2.2-3711 A (4) for the protection of the privacy of individuals in personal matters not related to public business. Namely for the purpose of reviewing behavior programming and client specific data and/or complaints, and or investigations for authorized representatives for Individual Choices, Holiday House of Portsmouth, Inc, Maryview Behavioral Medicine Center, St. Mary's Home for Disabled Children. Motion was made by Mr. John Dickinson and seconded by Mr. David Paige. All members present voted in favor of the motion. The motion was made to accept the information given during closed Executive Session and go into open session. All members present voted in favor of the motion.

Upon reconvening in open session, each member of EVLHRC certified that, to the best of each EVLHRC Member's knowledge, only public business matters lawfully exempted from statutory open meeting requirements, and only public business matters identified in the motion to convene the executive session were discussed in the executive session. See attached record of Executive Session.

X. Adjournment

The meeting adjourned at 12:05 p.m.

XI. Next Meeting:

The next meeting of the Eastern Virginia Local Human Rights Committee will be held on Thursday, April 24, 2014, at 9:30, at St. Mary's Home for Disabled Children, 6171 Kempsville Circle, Norfolk, VA 23502. St. Mary's Home for Disabled Children will provide refreshments.

Provider Annual Report of Human Rights Activities

Name of Provider: Holiday House of Portsmouth, Inc ICF/IID
Local Human Rights Committee: Eastern Virginia Local Human Rights Committee
Name of Provider LHRC Liaison: Melanie J. Draughn, BSW, QIDP
Name of Licensing Specialist: Dennis Riddick
Number of individuals served by provider this year: 28
Year: 2013

Submit the following reports from CHRIS for the year:

- CHRIS Report AB-01Summary- Abuse Cases Summary:
Holiday House of Portsmouth had 2 allegations of abuse and neglect for the year 2013 (See Summary Attached)
- CHRIS Comp-03-Complaint Category Summary: Holiday House of Portsmouth had 0 Complaints for 2013.
(Please See Summary Attached)

Provider Quarterly Report of Human Rights Activities

Name of Provider: Holiday House of Portsmouth, Inc ICF/IID
Local Human Rights Committee: Eastern Virginia Local Human Rights Committee
Name of Provider LHRC Liaison: Melanie J. Draughn, BSW, QIDP Social Worker
Name of Licensing Specialist: Dennis Riddick
Number of individuals served by provider in this quarter: 28
Year: 2013

Quarter: 1st Quarter: Jan. 1 - Mar. 31st _____
2nd Quarter: Apr. 1 -June 30 _____
3rd Quarter: July 1 –Sept. 30 _____
4th Quarter: Oct. 1 –Dec. 31 x _____

Submit the follow reports from CHRIS:

- CHRIS Report AB-01- Abuse Cases by date range **(Please see attached)** There was 1 allegation of abuse and neglect in December 2013.
- CHRIS Comp-01-Complaint Cases by date range **(Please see attached)** **Holiday House of Portsmouth had 0 complaints during this quarter.**
- Complaints or abuse cases that resulted in a violation (founded) should be printed from CHRIS and submitted. There was 1 allegation of abuse and neglect in December 2013. **(Please see attached and will be discussed in Executive Session)**
- Complaints or abuse cases that resulted in a corrective action plan should be printed from CHRIS and submitted. **(Please see attached and will discuss in Executive Session)**

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

Allegations of Abuse: *Holiday House of Portsmouth uses the following efforts to ensure allegations of abuse and neglect are captured as reported by the regulations. Upon receipt of any allegation of abuse or neglect this facility takes steps to protect the safety and welfare of the individual, suspend the suspected employee pending outcome of the investigation, ensure that Human Rights Advocate and Regulatory Authorities have been notified within a 24 hour time frame, and completed within a 5 day time frame. This facility notifies parents and child protective services.*

Human Rights Complaints: *Holiday House of Portsmouth uses the procedure established to allow for individuals or their parents/ authorized representatives to present their dissatisfaction with any aspect of the Holiday House program, and to seek satisfactory redress and resolution. The Holiday house will make every attempt to resolve complaints at earliest possible step. The Holiday House of Portsmouth will provide assistance and support to individual with the complaint process.*

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

There were no changes to Holiday House of Portsmouth, Inc ICF/IID DBHDS licensing during this quarter. There were no citations, services additions, and closures.

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

Holiday House of Portsmouth does not have any new or amended policies, procedures, or program rules during this quarter.

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

Holiday House of Portsmouth staff network with other professionals in the field of intellectual disabilities to continue to seek and recruit members for the Eastern Virginia Local Human Right Committee.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

IK: New Admission: Holiday House of Portsmouth, Inc ICF/IID will discuss in executive session

DK: Protective Mitt for Medical purposes: Holiday House of Portsmouth, Inc ICF/IID will discuss in executive sessions.

Provider Quarterly Report of Human Rights Activities

Name of Provider: Maryview Behavioral Medicine Services
Local Human Rights Committee: Eastern Virginia LHRC
Name of Provider LHRC Liaison: Lucy Rotich, RN, BSN, MSA, Administrative Director
Name of Licensing Specialist: Reginald Daye, Dept. of Behavioral Health and Developmental Services
Number of individuals served by provider in this quarter: 615
Quarter: 4th

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 5
Cases Pending:
Cases Closed: 5

Total Counts Alleged by Type:

Physical: 3 Sexual:
Verbal: Neglect: 1
Neglect (Peer to Peer): 2
Exploitation:
Other: Restraint:

Total Counts Occurred by Type:

Physical: Sexual:
Verbal: Neglect: 1
Neglect (Peer to Peer):
Exploitation:
Other: Restraint: 11

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Status of Complaint Cases

Total of Complaint Cases: 1
Number of cases resulting in a violation:
Cases Pending:
Cases Closed: 1

Complaint Category Totals:

Assurance of Rights:
Dignity: 1
Services:
Participation in Decision Making:
Confidentiality:
Access to and Amendment of Services record:
Restrictions on Freedoms of Everyday Life:
Use of Seclusion Restraint and Time Out:
Work:
Research:
Complaint and Fair Hearing:
Determination of Capacity to give consent:
Authorized Representatives:
Complaint Resolution:

Reporting Requirements:

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: 1

Number of complaints resolved in the Formal Process: _____

Below Director: _____

Director: _____

Commissioner: _____

LHRC: _____

SHRC: _____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

Patients are provided with a copy of rights on admission and this is repeated as a part of program each day.

Nurse Managers, supervisors and directors are informed of any allegations by patient and investigates.

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

None.

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

Provider Quarterly Report of Human Rights Activities

Name of Provider: St. Mary's Home for Disabled Children

I Human Rights Committee: Eastern Virginia LHRC

Name of Provider LHRC Liaison: Melanie Perez-Lopez

Name of Licensing Specialist: Nate Woodard _____

Number of individuals served by provider in this quarter: 82 _____

Quarter: October 1 to December 31, 2013

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 4

Cases Pending: 0

Cases Closed: 4

Total Counts Alleged by Type:

Physical: 1 Sexual: _____

Verbal: _____ Neglect: 3

Neglect (Peer to Peer): _____

Exploitation: _____

Other: _____ Restraint: _____

Total Counts Occurred by Type:

Physical: _____ Sexual: _____

Verbal: 0 Neglect: _____

Neglect (Peer to Peer) : _____

Exploitation: _____

Other: _____ Restraint: _____

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Details will be discussed in Executive Session.

Status of Complaint Cases

Total of Complaint Cases: 0

Number of cases resulting in a violation: 0

Cases Pending: 0

Cases Closed: 0

Complaint Category Totals:

Assurance of Rights: _____

Dignity: _____

Services: _____

Participation in Decision Making; _____

Confidentiality: _____

Access to and Amendment of Services record: _____

Restrictions on Freedoms of Everyday Life: _____

Use of Seclusion Restraint and Time Out: _____

Work: _____

Research: _____

Complaint and Fair Hearing; _____

Determination of Capacity to give consent: _____

Authorized Representatives: _____

Complaint Resolution: _____

Reporting Requirements: _____

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: _____ 0 _____

Number of complaints resolved in the Formal Process: _____ 0 _____

Below Director: _____

Director: _____

Commissioner: _____

LHRC: _____

SHRC: _____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

St. Mary's HDC process is a reporting of any "event" on an Event Report and daily "huddle" (M-F) to address the reports with key staff. QI reports any events of alleged abuse or neglect to Social Work immediately upon receipt. Staff can also directly report to Social Work in writing (privately and confidentially) or verbally any suspected abuse/ neglect referrals.

Staff Development does an annual inservice on our Human Rights policy and our Abuse and Neglect policy. They also orient any new employees on these policies.

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

St. Mary's is adding the Albero House to our existing license which will house 12 adults over the age of 22. We anticipate that 12 of our residents will transition to the Albero House as they age-out of the Children's facility. Albero House is also now affiliated with this EVLHRC. We had a successful inspection with licensing on July 9, 2013 and received our license on November 19, 2013.

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

St. Mary's HDC has not added any new policies, procedures or programs. The Albero House (for adults) should be opening in July or August of 2013, however we anticipate that the Human Rights policy and procedures will follow our established policies as in the Children's facility.

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

See report from last quarter.

Provider Quarterly Report of Human Rights Activities

Name of Provider: AC SUPPORT SYSTEMS

Local Human Rights Committee: SVLHRC

Name of Provider LHRC Liaison: Rizal Cruz

Name of Licensing Specialist: Ed Gonzalez

Number of individuals served by provider in this quarter: 12

Year: 2014

Quarter: <u>1st</u>	Quarter: <u>Jan. 23</u>	<u>X</u>
<u>2nd</u>	Quarter: <u>April 24</u>	<u> </u>
<u>3rd</u>	Quarter: <u>July 24</u>	<u> </u>
<u>4th</u>	Quarter: <u>Oct. 24</u>	<u> </u>

Submit the follow reports from CHRIS:

- CHRIS Report AB-01- Abuse Cases by date range
- CHRIS Comp-01-Complaint Cases by date range
- Complaints or abuse cases that resulted in a violation (founded) should be printed from CHRIS and submitted.
- Complaints or abuse cases that resulted in a corrective action plan should be printed from CHRIS and submitted.

** Remember to always remove all names and other identifying information before submitting a case to the local human rights committee.*

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

No allegation of abuse and neglect

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

No allegation of abuse and neglect

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

No allegation of abuse and neglect

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

No Behavioral Plan is being implemented nor use of restraint or time out.

Provider Quarterly Report of Human Rights Activities

Name of Provider: Better Life Services, Inc.
Local Human Rights Committee: Eastern Virginia
Name of Provider LHRC Liaison: Greg LeFever
Name of Licensing Specialist: Gale Schreiner
Number of individuals served by provider in this quarter: 81
Quarter: Oct 1– Dec 31, 2013

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0
Cases Pending: 0
Cases Closed: 0

Total Counts Alleged by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Total Counts Occurred by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Status of Complaint Cases

Total of Complaint Cases: 0
Number of cases resulting in a violation: 0
Cases Pending: 0
Cases Closed: 0

Complaint Category Totals:

Assurance of Rights: 0
Dignity: 0
Services: 0
Participation in Decision Making: 0
Confidentiality: 0
Access to and Amendment of Services record: 0
Restrictions on Freedoms of Everyday Life: 0
Use of Seclusion Restraint and Time Out: 0
Work: 0
Research: 0
Complaint and Fair Hearing: 0
Determination of Capacity to give consent: 0
Authorized Representatives: 0
Complaint Resolution: 0
Reporting Requirements: 0

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: 0

Number of complaints resolved in the Formal Process: 0

Below Director: _____

Director: _____

Commissioner: _____

LHRC: _____

SHRC: _____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

No incidents

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

Request for Intensive In Home Service addition

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

Provider Quarterly Report of Human Rights Activities

Name of Provider: Community Options, LLC
Local Human Rights Committee: Easter Virginia Local Human Rights Committee
Name of Provider LHRC Liaison: Reginald Daye
Name of Licensing Specialist: Dennis Riddick
Number of individuals served by provider in this quarter: 5
Quarter: 1st – January 23, 2014

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0
Cases Pending: 0
Cases Closed: 0

Total Counts Alleged by Type:

Physical: _____ Sexual: _____
Verbal: _____ Neglect: _____
Neglect (Peer to Peer): _____
Exploitation: _____
Other: _____ Restraint: _____

Total Counts Occurred by Type:

Physical: _____ Sexual: _____
Verbal: _____ Neglect: _____
Neglect (Peer to Peer): _____
Exploitation: _____
Other: _____ Restraint: _____

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Status of Complaint Cases

Total of Complaint Cases: 0
Number of cases resulting in a violation: 0
Cases Pending: 0
Cases Closed: 0

Complaint Category Totals:

Assurance of Rights: 0
Dignity: 0
Services: 0
Participation in Decision Making: 0
Confidentiality: 0
Access to and Amendment of Services record: 0
Restrictions on Freedoms of Everyday Life: 0
Use of Seclusion Restraint and Time Out: 0
Work: 0
Research: 0
Complaint and Fair Hearing: 0
Determination of Capacity to give consent: 0
Authorized Representatives: 0
Complaint Resolution: 0
Reporting Requirements: 0

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: 0

Number of complaints resolved in the Formal Process: 0

Below Director: 0

Director: 0

Commissioner: 0

LHRC: 0

SHRC: 0

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

None

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

None

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

None

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

None

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

None

Provider Annual Report of Human Rights Activities

Name of Provider: Virginia Home Based Counseling
Local Human Rights Committee: EVA LHRC
Name of Provider LHRC Liaison: Yvonne Green
Name of Licensing Specialist: Gail Schreiner
Number of individuals served by provider this year: 32
Year: 2013

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0
Cases Pending: 0
Cases Closed: 0

Total Counts Alleged by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Total Counts Occurred by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Status of Complaint Cases

Total of Complaint Cases: 0
Number of cases resulting in a violation: 0
Cases Pending: 0
Cases Closed: 0

Complaint Category Totals:

Assurance of Rights: 0
Dignity: 0
Services: 0
Participation in Decision Making: 0
Confidentiality: 0
Access to and Amendment of Services record: 0
Restrictions on Freedoms of Everyday Life: 0
Use of Seclusion Restraint and Time Out: 0
Work: 0
Research: 0
Complaint and Fair Hearing: 0
Determination of Capacity to give consent: 0
Authorized Representatives: 0
Complaint Resolution: 0
Reporting Requirements: 0

Complaint Resolution Level:

Total Number of complaints resolved in the Informal Process: 0

Total Number of complaints resolved in the Formal Process: 0

Below Director: 0

Director: 0

Commissioner: 0

LHRC: 0

SHRC: 0

Provider Quarterly Report of Human Rights Activities

Name of Provider: Virginia Support Services
Local Human Rights Committee: EVA LHRC
Name of Provider LHRC Liaison: Yvonne Green
Name of Licensing Specialist: Carol Schreiner
Number of individuals served by provider in this quarter: 106
Quarter: 4th

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0
Cases Pending: 0
Cases Closed: 0

Total Counts Alleged by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Total Counts Occurred by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Status of Complaint Cases

Total of Complaint Cases: 0
Number of cases resulting in a violation: 0
Cases Pending: 0
Cases Closed: 0

Complaint Category Totals:

Assurance of Rights: 0
Dignity: 0
Services: 0
Participation in Decision Making: 0
Confidentiality: 0
Access to and Amendment of Services record: 0
Restrictions on Freedoms of Everyday Life: 0
Use of Seclusion Restraint and Time Out: 0
Work: 0
Research: 0
Complaint and Fair Hearing: 0
Determination of Capacity to give consent: 0
Authorized Representatives: 0
Complaint Resolution: 0
Reporting Requirements: 0

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: 0

Number of complaints resolved in the Formal Process:

Below Director: 0

Director: 0

Commissioner: 0

LHRC: 0

SHRC: 0

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations. Same as previously reported

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures. None

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs. Using handle with care since December

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed. None this quarter

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

Provider Quarterly Report of Human Rights Activities

Name of Provider: Virginia Home Based Counseling
Local Human Rights Committee: EVA LHRC
Name of Provider LHRC Liaison: Yvonne Green
Name of Licensing Specialist: Carol Schreiner
Number of individuals served by provider in this quarter: 29
Quarter: 4th

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0
Cases Pending: 0
Cases Closed: 0

Total Counts Alleged by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Total Counts Occurred by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Status of Complaint Cases

Total of Complaint Cases: 0
Number of cases resulting in a violation: 0
Cases Pending: 0
Cases Closed: 0

Complaint Category Totals:

Assurance of Rights: 0
Dignity: 0
Services: 0
Participation in Decision Making: 0
Confidentiality: 0
Access to and Amendment of Services record: 0
Restrictions on Freedoms of Everyday Life: 0
Use of Seclusion Restraint and Time Out: 0
Work: 0
Research: 0
Complaint and Fair Hearing: 0
Determination of Capacity to give consent: 0
Authorized Representatives: 0
Complaint Resolution: 0
Reporting Requirements: 0

Complaint Resolution Level:Number of complaints resolved in the Informal Process: 0Number of complaints resolved in the Formal Process: Below Director: 0Director: 0Commissioner: 0LHRC: 0SHRC: 0**Provide details, by date of occurrence, of all cases that resulted in the following:**

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations. Same as previously reported

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures. None

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs. Using handle with care since December

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed. None this quarter

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

Provider Quarterly Report of Human Rights Activities

Name of Provider: Psalms Assistive Support Services LLC

Local Human Rights Committee: _____

Name of Provider LHRC Liaison: Latasha Holloway

Name of Licensing Specialist: Woodard

Number of individuals served by provider in this quarter: 0

Year: 2014

Quarter: **1st Quarter:** **Jan. 1 - Mar. 31st** **X**

2nd Quarter: **Apr. 1 -June 30** _____

3rd Quarter: **July 1 –Sept. 30** _____

4th Quarter: **Oct. 1 –Dec. 31** _____

Submit the follow reports from CHRIS:

- CHRIS Report AB-01- Abuse Cases by date range
- CHRIS Comp-01-Complaint Cases by date range
- Complaints or abuse cases that resulted in a violation (founded) should be printed from CHRIS and submitted.
- Complaints or abuse cases that resulted in a corrective action plan should be printed from CHRIS and submitted.

** Remember to always remove all names and other identifying information before submitting a case to the local human rights committee.*

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

N/A

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures. N/A

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs. N/A

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed. N/A

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

N/A

Provider Quarterly Report of Human Rights Activities

Name of Provider: Angel House, Inc.
Local Human Rights Committee: Eastern Virginia Local HR
Name of Provider LHRC Liaison: Stewart Prost
Name of Licensing Specialist: Ed Gonzalez
Number of individuals served by provider in this quarter: 0
Quarter: December 31, 2013

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0
Cases Pending: 0
Cases Closed: 0

Total Counts Alleged by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Total Counts Occurred by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Status of Complaint Cases

Total of Complaint Cases: 0
Number of cases resulting in a violation: 0
Cases Pending: 0
Cases Closed: 0

Complaint Category Totals:

Assurance of Rights: 0
Dignity: 0
Services: 0
Participation in Decision Making: 0
Confidentiality: 0
Access to and Amendment of Services record: 0
Restrictions on Freedoms of Everyday Life: 0
Use of Seclusion Restraint and Time Out: 0
Work: 0
Research: 0
Complaint and Fair Hearing: 0
Determination of Capacity to give consent: 0
Authorized Representatives: 0
Complaint Resolution: 0
Reporting Requirements: 0

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: _____0

Number of complaints resolved in the Formal Process: _____0

Below Director: _____

Director: _____

Commissioner: _____

LHRC: _____

SHRC: _____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

No Activity

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

N/A

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

N/A

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

N/A

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

N/A

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

N/A

Provider Annual Report of Human Rights Activities

Name of Provider: Envision Family Services, LLC
Local Human Rights Committee: _____
Name of Provider LHRC Liaison: Mercedes Santos-Bell & Shanequa Vass
Name of Licensing Specialist: Nerissa Rhodes
Number of individuals served by provider this year: 32
Year: 2013

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0
Cases Pending: 0
Cases Closed: 0

Total Counts Alleged by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Total Counts Occurred by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Status of Complaint Cases

Total of Complaint Cases: 0
Number of cases resulting in a violation: 0
Cases Pending: 0
Cases Closed: 0

Complaint Category Totals:

Assurance of Rights: 0
Dignity: 0
Services: 0
Participation in Decision Making: 0
Confidentiality: 0
Access to and Amendment of Services record: 0
Restrictions on Freedoms of Everyday Life: 0
Use of Seclusion Restraint and Time Out: 0
Work: 0
Research: 0
Complaint and Fair Hearing: 0
Determination of Capacity to give consent: 0
Authorized Representatives: 0
Complaint Resolution: 0
Reporting Requirements: 0

Complaint Resolution Level:

Total Number of complaints resolved in the Informal Process: None

Total Number of complaints resolved in the Formal Process: None

Below Director: _____

Director: _____

Commissioner: _____

LHRC: _____

SHRC: _____

Provider Quarterly Report of Human Rights Activities

Name of Provider: Envision Family Services, LLC
Local Human Rights Committee: Eastern Virginia LHRC Region 5
Name of Provider LHRC Liaison: Mercedes Santos-Bell & Shanequa Vass, Co-Owners
Name of Licensing Specialist: Nerissa Rhodes
Number of individuals served by provider in this quarter: 22
Quarter: 4th (October 2013-December 2013)

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0
Cases Pending: 0
Cases Closed: 0

Total Counts Alleged by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Total Counts Occurred by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Provide details, by date of occurrence, of all cases. Include any required Corrective Action. None

Status of Complaint Cases

Total of Complaint Cases: 0
Number of cases resulting in a violation: 0
Cases Pending: 0
Cases Closed: 0

Complaint Category Totals:

Assurance of Rights: 0
Dignity: 0
Services: 0
Participation in Decision Making: 0
Confidentiality: 0
Access to and Amendment of Services record: 0
Restrictions on Freedoms of Everyday Life: 0
Use of Seclusion Restraint and Time Out: 0
Work: 0
Research: 0
Complaint and Fair Hearing: 0
Determination of Capacity to give consent: 0
Authorized Representatives: 0
Complaint Resolution: 0
Reporting Requirements: 0

Complaint Resolution Level:Number of complaints resolved in the Informal Process: 0Number of complaints resolved in the Formal Process: 0

Below Director: _____

Director: _____

Commissioner: _____

LHRC: _____

SHRC: _____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation, None
- a request for fact-finding (LHRC hearing), None
- a Corrective Action Plan, None

Additional reporting and review requirements as applicable:

None

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

None

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

Upon approval by licensing specialist, Envision Family Services will change location to 3210 Churchland Blvd. Chesapeake VA 23321.

Expected date: January 2014

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

None

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

None

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

None

Provider Annual Report of Human Rights Activities

Name of Provider: Jerious Counseling Services, LLC
Local Human Rights Committee: Eastern Virginia Regional Local Human Rights Committee
Name of Provider LHRC Liaison: Cynthia Cummings
Name of Licensing Specialist: Mr. Ed. Gonzales
Number of individuals served by provider this year: 6
Year: 2013

Submit the following reports from CHRIS for the year:

- CHRIS Report AB-01Summary- Abuse Cases Summary
- CHRIS Comp-03-Complaint Category Summary

Provider Quarterly Report of Human Rights Activities

Name of Provider: Jerious Counseling Services, LLC
Local Human Rights Committee: Eastern Virginia Regional Local Human Rights Committee
Name of Provider LHRC Liaison: Cynthia Cumming
Name of Licensing Specialist: Mr. ED Gonzales
Number of individuals served by provider in this quarter: 9
Quarter: 1st, 2014

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0
Cases Pending: 0
Cases Closed: 0

Total Counts Alleged by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Total Counts Occurred by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Jerious Counseling Services, LLC no corrective action at this time.

Status of Complaint Cases

Total of Complaint Cases: 0
Number of cases resulting in a violation: 0
Cases Pending: 0
Cases Closed: 0

Complaint Category Totals:

Assurance of Rights: 0
Dignity: 0
Services: 0
Participation in Decision Making: 0
Confidentiality: 0
Access to and Amendment of Services record: 0
Restrictions on Freedoms of Everyday Life: 0
Use of Seclusion Restraint and Time Out: 0
Work: 0
Research: 0
Complaint and Fair Hearing: 0
Determination of Capacity to give consent: 0

Authorized Representatives: 0
Complaint Resolution: 0
Reporting Requirements: 0

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: 0
Number of complaints resolved in the Formal Process: 0

Below Director: _____

Director: Cynthia Cummings

Commissioner: _____

LHRC: Mr. Post

SHRC: Mr. Day

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures. Jerious Counseling Services, LLC was licensed on March 1, 2013. We are serving at this moment 4 clients.

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs. No amended policies or rules at this time.

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed. No action taken at this time.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out: 0

Provider Annual Report of Human Rights Activities

Name of Provider: Cary Associates LLC, DBA Youth Empowerment Services
Local Human Rights Committee: Eastern Virginia Regional Local Human Rights Committee
Name of Provider LHRC Liaison: Theresa Sands-Dawling/Dr. Damon Cary
Name of Licensing Specialist: Dennis Riddick
Number of individuals served by provider in this quarter: twenty-seven (27)
Year: **2013**_____

Submit the following reports from CHRIS for the year:

- CHRIS Report AB-01Summary- Abuse Cases Summary
- CHRIS Comp-03-Complaint Category Summary

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: none
Cases Pending: none
Cases Closed: none

Status of Complaint Cases

Total of Complaint Cases: None
Number of cases resulting in a violation: _____
Cases Pending: _____
Cases Closed: _____

Provider Quarterly Report of Human Rights Activities

Name of Provider: Potentials In Life LLC
Local Human Rights Committee: Eastern Virginia Regional Local Human Rights Committee
Name of Provider LHRC Liaison: Terrell/Shunda Cuffee
Name of Licensing Specialist: Ed Gonzalez
Number of individuals served by provider in this quarter: 0
Quarter : 0

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0
Cases Pending: 0
Cases Closed: 0

Total Counts Alleged by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Total Counts Occurred by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Status of Complaint Cases

Total of Complaint Cases: : 0
Number of cases resulting in a violation: 0
Cases Pending: 0
Cases Closed: 0

Complaint Category Totals:

Assurance of Rights: 0
Dignity: 0
Services: 0
Participation in Decision Making: 0
Confidentiality: 0
Access to and Amendment of Services record: 0
Restrictions on Freedoms of Everyday Life: 0
Use of Seclusion Restraint and Time Out: 0
Work: 0
Research: 0
Complaint and Fair Hearing: 0
Determination of Capacity to give consent: 0
Authorized Representatives: 0
Complaint Resolution: 0
Reporting Requirements: 0

Complaint Resolution Level:Number of complaints resolved in the Informal Process: 0Number of complaints resolved in the Formal Process: 0

Below Director: _____

Director: _____

Commissioner: _____

LHRC: _____

SHRC: _____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

EVLHRC QUARTERLY MEETING DATES AND LOCATIONS 2014

1 ST Quarterly Meeting	9:30 a.m., Thursday January 23, 2014	St. Mary's Home for Disabled Children 6171 Kempsville Circle Norfolk, VA 23502
2 nd Quarterly Meeting	9:30 a.m., Thursday April 24, 2014	St. Mary's Home for Disabled Children 6171 Kempsville Circle Norfolk, VA 23502
3 rd Quarterly Meeting	9:30 a.m., Thursday July 24, 2014	St. Mary's Home for Disabled Children 6171 Kempsville Circle Norfolk, VA 23502
4 th Quarterly Meeting	9:30 a.m., Thursday October 23, 2013	St. Mary's Home for Disabled Children 6171 Kempsville Circle Norfolk, VA 23502